

Substitute for form 1449A/PTO		Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT		Application Number	
		Filing Date	
		First Named Inventor	Jermolajev, Igor
		Art Unit	
		Examiner Name	
(Use as many sheets as necessary)		Attorney Docket Number	083234-000900US
Sheet	1	of	2

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number Number Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	AA	US-6,643,001	11/04/2003	Faris	
	AB	US-6,666,995	12/23/2003	Meikka	
	AC	US-2003/178734 A1	09/25/2003	Josephy	
	AD	US-			
	AE	US-			
	AF	US-			
	AG	US-			
	AH	US-			
	AI	US-			
	AJ	US-			
	AK	US-			
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	AO	US-			
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FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				
	AS	EP	0 629 989		21 December 1994	Loving, Charles Dennis		<input type="checkbox"/>
	AT							<input type="checkbox"/>
	AU							<input type="checkbox"/>
	AV							<input type="checkbox"/>
	AW							<input type="checkbox"/>

Examiner Signature	/Martin Angebrannt/	Date Considered	04/15/2010
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ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /M.A./

Substitute for form 1449B/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				Complete if Known	
				Application Number	
				Filing Date	
				First Named Inventor	
				Art Unit	
				Examiner Name	
Sheet	2	of	2	Attorney Docket Number	
				083234-000900US	

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
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	BG		<input type="checkbox"/>
	BH		<input type="checkbox"/>
	BI		<input type="checkbox"/>
	BJ		<input type="checkbox"/>

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